

POSZ LAW GROUP, PLC

ATTORNEYS AT LAW

12040 SOUTH LAKES DRIVE, SUITE 101
RESTON, VA 20191

SPECIALIZING IN PATENTS, TRADEMARKS & COPYRIGHTS

TEL: (703) 707-8110
FAX: (703) 707-8112
WWW.POSZLAW.COMDAVID G. POSZ
JAMES E. BARLOW
BRIAN C. ALTMILLER
ROBERT L. SCOTT, II
CYNTHIA M. NICHOLSON
R. EUGENE VARNDELL, JR.
THERESE B. VARNDELL

DEBRA G. SHORMAKER, PH.D.**

** NOT ADMITTED IN VIRGINIA
PRACTICE LIMITED TO FEDERAL PATENT,
TRADEMARK AND COPYRIGHT MATTERS
** PATENT AGENT**FACSIMILE TRANSMISSION**Date: ~~January 27~~ ^{Feb. 2} 2006

Pages: 4

To: **U.S. Patent Office -
Office of Finance - Refund Branch**
Fax No.: 571-273-6500

From: David G. Posz

Subject: **Request for Refund of Extension Fee**

Applicant(s): SUGANUMA et al.

Application No.: ~~10-729,836~~ ^{B.M.} 09,729,836

Attorney Docket No.: 01-104-RCE

Filed: December 6, 2000

Group Art Unit: 2635

Title: **CONTROL INFORMATION
REWRITING SYSTEM**

Examiner: BROWN, VERNAL U

Sirs,

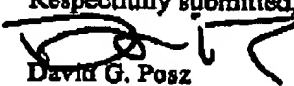
Applicants request a refund to Deposit Account 50-1147 of the PTO fee of \$120 for the one-month extension petition which was charged to our Deposit Account 50-1147 on August 1, 2005 since the fee was charged twice on the same date for this application.

Copies of the Petition for Extension of Time of July 28, 2005 and our Deposit Account Statement of August 2005 are attached herewith.

Authorization is hereby given to charge any fee deficiencies or credit any overpayment to Deposit Account 50-1147.

Adjustment date: 02/17/2006 EEKURBY1
08/01/2005 TCLEY 00000001 501147 09729836
01 FC:1251 120.00 CR

Respectfully submitted,


David G. Posz
Reg. No. 37,701
******Notice******

The information contained in this facsimile transmission is intended only for the above-indicated addressee, and may contain privileged and confidential attorney work product or trade secret information. Any dissemination, distribution or copying of any part of this transmission is strictly prohibited. If you have received this transmission in error, please immediately notify the sender, and return the transmission to the sender at the above-indicated address.

P:\Share\PTO ACCOUNT\DEC2005\01_104-RCE PTO REFUND.doc

Based on PTO/SB/22 (12-04)

Approved for use through 7/31/2008. OMB 0661-0081

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 01-104-RCE	
Application Number 08/729,836		Filed 12/08/2000	
For CONTROL INFORMATION REWRITING SYSTEM			
Art Unit		Examiner	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	Fee \$ 120.00	Small Entity Fee \$ 60.00	\$ <u>120.00</u>
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ 450.00	\$ 225.00	\$ _____
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ 1,020.00	\$ 510.00	\$ _____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ 1,590.00	\$ 795.00	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2,160.00	\$ 1,080.00	\$ _____
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2036 is attached.			
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>80-1147</u> . I have enclosed a duplicate copy of this sheet.			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2036.			
I am the <input type="checkbox"/> applicant/inventor.			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>37,701</u>			
<input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____			
_____ Signature		_____ Date	
_____ David G. Posz (Reg. No. 37,701)		_____ (703) 707-9110	
Typed or printed name		Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input type="checkbox"/> Total of _____ forms are submitted.			

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 36 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



**United States
Patent and
Trademark Office**



Deposit Account Statement

Requested Statement Month: August 2005
 Deposit Account Number: 501147
 Name: POSZ LAW GROUP, PLC
 Attention: DAVID G. POSZ
 Address: 12040 SOUTH LAKES DRIVE
 City: RESTON
 State: VA
 Zip: 20191
 Country: UNITED STATES OF AMERICA

DATE	SEQ	POSTING REF TXT	ATTORNEY DOCKET NBR	FEE CODE	AMT	BAL
08/01	1	09729836	01-104	1251	\$120.00	\$8,008.00
08/01	4	09729836	01-104	1251	\$120.00	\$7,885.00
08/02	1	10310021	1-388	1808	\$180.00	\$7,705.00
08/02	10	10022224	11-078	1251	\$120.00	\$7,585.00
08/02	11	10022224	11-078	1202	\$100.00	\$7,485.00
08/02	14	10729836	01-518	1251	\$120.00	\$7,365.00
08/02	15	10729836	01-518	1202	\$50.00	\$7,315.00
08/03	25	10516327		9204	-\$50.00	\$7,365.00
08/09	7	10087928	P290788	1202	\$50.00	\$7,315.00
08/09	35	10622827	26D-008	1251	\$120.00	\$7,195.00
08/10	21	10394283	01-398	1252	\$330.00	\$6,865.00
08/10	22	10394283	01-398	1801	\$790.00	\$6,075.00
08/15	13	11198057	02-153	8021	\$40.00	\$6,035.00
08/18	199	8377488	14-001	1551	\$900.00	\$5,135.00
08/19	32	09788481	P 277124	1251	\$120.00	\$5,015.00
08/23	31	10168805	12-021	1484	\$130.00	\$4,885.00
08/23	32	10168805	12-021	1801	\$790.00	\$4,095.00
08/23	589	10983778		8021	\$40.00	\$4,055.00
08/24	44	E-REPLENISHMENT		9203	-\$5,000.00	\$9,055.00
08/24	48	11208724	03-063	1081	\$100.00	\$8,955.00
08/25	48	10789759	01-548	1252	\$450.00	\$8,505.00
08/26	1	10374102	01-390	1484	\$130.00	\$8,375.00
08/26	2	10374102	01-390	1801	\$790.00	\$7,585.00

08/30 1	10308091	CE08367R/10- 1501	-\$1,330.00	\$8,915.00
08/31 4	PCT/US05/28420	0204	-\$19.00	\$8,934.00

START BALANCE	SUM OF CHARGES	SUM OF REPLENISH	END BALANCE
\$8,125.00	\$5,590.00	\$6,399.00	\$8,934.00

[Need Help?](#) | [USPTO Home Page](#) | [Finance Online Shopping Page](#)